Attorney

Docket No.: AMCC-001XX

## DECLARATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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The s	pecification of v	which (check one):					
[X]	is attached here	eto. [] was filed amended	d on	6	as Applicati (if appl	on No. icable).	
[ ] w		International. Appl. der PCT Article 19					
I he	reby state that	I have reviewed a	and unders	stand the o	ontonts of	+bo -1	ve-identified
I ack appli	mowledge the dut cation in accorda	y to disclose infor nce with Title 37,	mation whi Code of Fe	ch is materi deral Regula	ial to the tions \$1.56	patentabi (a).	lity of this
any 🏗	oreign applicatio	gn priority beneficent or inventor's con for patent or inventor inventority is claim	entor's car	Title 35, ( listed belo	JSC §119(a) w and have ring a filin	-(d) of also ider ng date be	any foreign ntified below efore that of
	Prior Foreign	Application(s)		Date Fi	<u>led</u> P	riority	Claimed
Hard Short Had		(Country)		(Day/Mo	nth/Year)	[ ] Yes	[ ] No
Manual miles	(Number)	(Country)	···	(Day/Mo	nth/Year)	[ ] Yes	[ ] No
	(Number)	(Country)		(Day/Mo	nth/Year)	[ ] Yes	[] No
her ppli	eby claim the beation(s) listed b	penefit under Title below:	35, USC	\$119(e) of	any Unite	d States	provisional
	60/245,895 (Application N	Number)		vember 3, 2 (Filing Dat			
	(Application N	Number)		(Filing Dat	ce)		
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Express Mail Number

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Attorney

Docket No.: AMCC-001XX

I hereby claim the benefit under Title 35 USC \$120 of any United States application(s) listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35 USC \$112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, \$1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application No.)	(Filing Date)	(Patented/pending/abandoned)
(Application No.)	(Filing Date)	(Patented/pending/abandoned)
(Application No.)	(Filing Date)	(Patented/pending/abandoned)

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) to prosecute this application and transact all business connected therewith in the Patent and Trademark Office, and to file with the USRO any International Application based thereon.

Stanley M. Schurgin, Reg. No. 20,979 Charles L. Gagnebin III, Reg. No. 25,467 Victor B. Lebovici, Reg. No. 30,864 Beverly E. Hjorth, Reg. No. 32,033 Holliday C. Heine, Reg. No. 34,346 Gordon R. Moriarty, Reg. No. 38,973 James F. Thompson, Reg. No. 36,699

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WEINGARTEN, SCHURGIN, GAGNEBIN & LEBOVICI LLP

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First/Sole Inventor: Lawrence Aaron Boxer					
City of Residence State or Country Massachusetts		Country of Citizenship USA			
Post Office Address 160 Stearns Street	City Carlisle	State or Country Zip Code Massachusetts 01741			
Signature: (Please sign and dat  X / Aum dunt	Date signed:  X Oct 23 ,200				
		,			

Sheet 3 of 3

Attorney
Docket No.: AMCC-001XX

Full Name of Second/Joint Dan Castagnozzi	Inventor:		
City of Residence	State <b>or</b> Country	Country of Citizenship	
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26 Demar Road	Lexington	Massachusetts 02173	
Signature: (Please sign and date in permanent ink.)		Date signed: X /0/24/200/	

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